

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
UTILITY PATENT APPLICATION TRANSMITTAL

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: **James Reink et al.**
TITLE: **IMPLANTABLE MEDICAL DEVICE COMMUNICATION SYSTEM WITH PULSED POWER BIASING**

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, *EXPRESS No. EV 331 791 925 US, on this 11TH day of DECEMBER, 2003.

LAURIE L. GRUBE
Printed Name [Signature]
Signature

MAIL STOP PATENT APPLICATION
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

☒ **Patent Application Transmittal**

☒ **Specification:**

Total pages: 57 (including claims and abstract: Spec. 49 sheets; Claims 7 sheets; Abstract 1

☒ **Drawings:**

Total sheets: 30

☒ formal ☐ informal

☒ **Combined Declaration and Power of Attorney:**

- ☒ executed
☐ copy from prior application
☐ Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))
☐ Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

☒ **Accompanying application parts:**

- ☐ Notification of filing a
☒ Assignment of the Invention to Medtronic, Inc.
☒ Assignment cover sheet
☐ Information Disclosure Statement
☐ PTO Form 1449
☐ Copies of IDS citations
☐ Preliminary Amendment
☐ A copy of the Petition or Conditional Petition for Extension of Time in the prior application.
☒ Return Postcard

IF A CONTINUING APPLICATION:

- ☒ Continuation Serial No. 10/254,236 ☐ Divisional ☒ Continuation-in-part (CIP) of prior application
- ☐ Amend the specification by inserting before the first line the sentence: --This application is a f application Serial No. , filed , now allowed.--
- ☐ Cancel in this application original claims of the prior application before calculating the filing fee. (At least the original independent claim must be retained for filing purposes.)
- ☐ The prior application is assigned for record to Medtronic, Inc.
- ☐ The Power of Attorney in the prior application is to: .

☐ This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) _____, filed _____.

X Address all future correspondence to: Daniel G. Chapik, Reg. No. 43,424
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FEE CALCULATION	No. of Claims			No. of	Rate	Fee
	Filed	Claims Included in		Extra		
		Base Fee		Claims		
Total Claims	32	20	=	12	x 18	216.00
Independent Claims	3	3	=	0	x 86	
Multiple Dependent Claims				0	+ 290	
Basic Filing Fee						\$770.00
TOTAL						986.00

X Charge Deposit Account No. 13-2546 in the amount of \$986.00 for the Filing fee and \$40.00 for the Assignment fee, for a total fee of \$1,026.00.

X The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

Date

12/11/03


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